

CONGRESSMAN
ROBERT HURT
SERVING VIRGINIA'S 5TH DISTRICT



**Service Academy Nomination
Application Packet**

Class of 2019



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2014 Application Schedule

April 1st	Applications accepted
November 3rd	Application deadline
November-December	Review of completed packets
January	Nominations made and nominees notified

Check List for Candidates:

- ☐ 1. Take the SAT/ACT and have scores sent to the Danville District Office. **SAT Code is: 5988 and the ACT Code is: 7728.**
- ☐ 2. Attach a recent photo with a solid background. The submitted photo should only include the applicant.
- ☐ 3. Submit a sealed official high school transcript including class rank.
- ☐ 4. Submit college transcripts, if applicable.
- ☐ 5. Submit three sealed letters of recommendation with the enclosed coversheet for each reference.
- ☐ 6. Submit an Essay in 300 words or more, of what motivates you to attend a U.S. Service Academy and why you would be the best candidate.
- ☐ 7. Submit a one page Resume listing all activities and achievements.
- ☐ 8. Submit signed and completed application by the deadline of **November 3, 2014.**

**ALL CORRESPONDENCE AND QUESTIONS RELATED TO YOUR
ACADEMY NOMINATION SHOULD BE DIRECTED TO:**

**Ms. Shani Shorter
Office of Congressman Robert Hurt
308 Craghead Street
Suite #102-D
Danville, Virginia 24541
(434) 791-2596
Email: shani.shorter@mail.house.gov**

****Please note that the Applicant is responsible for making sure that their file with our office is complete.****



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I. Personal Information

Applicant's Legal Name: _____
Last First Middle Suffix

Nickname: _____ ☐ Male ☐ Female

Home Address in the 5th District: _____
Number and Street City State Zip

Mailing Address (if different): _____
Number and Street City State Zip

Home Phone: _____ Cell Phone: _____

Place of Birth: _____ Date of Birth: _____

Email Address: _____ Social Security Number: _____

II. Family Information

Father's Legal Name: _____ ☐ Living ☐ Deceased
Last First Middle

Occupation: _____ Telephone Number: _____

Mother's Legal Name: _____ ☐ Living ☐ Deceased
Last First Middle

Occupation: _____ Telephone Number: _____

Legal Guardian, if other than parent: _____
Name Relationship

Occupation: _____ Telephone Number: _____



III. Educational Information

High School

High School: _____

Address: _____
Number and Street City State Zip

Date of Graduation: _____ **Telephone Number:** _____

Grade Point Average: _____ **Class Standing:** _____ of _____

College/Preparatory School

College/Preparatory School: _____

Address: _____
Number and Street City State Zip

Major: _____ **Credit Hours Earned:** _____ **Grade Point Average:** _____

IV. Activities and Honors

Please attach a one page resume detailing all your extracurricular activities, honors achieved, awards of distinction or recognitions earned, and/or any positions you have held or currently hold. Activities can include anything from a religious organization, community group, or participation in any school or athletic organizations. Please indicate any leadership positions you have held or currently hold, and specify what grade in high school that they occurred.

V. Essay

Please attach an essay, 300 words or more, detailing your motivation for attending a U.S. Service Academy and why you would be the best candidate seeking a Congressional Nomination. The essay should be typed and double-spaced. Please ensure that your full name is on the document as well.



VI. Employment

Please list any jobs you have held since you have been in high school:

Dates	Employer/Supervisor	Hours/week
_____	_____	_____
_____	_____	_____

VII. Required Standardized Testing

Please list the dates you have taken the following tests along with the respective scores.

Scholastic Assessment Test (SAT)

Date: _____
Verbal: _____
Math: _____
Writing: _____

American College Testing (ACT)

Date: _____
English: _____
Math: _____
Composite: _____

☐ I have not taken the required test(s), but I plan to take them on the dates indicated:

SAT: _____

ACT: _____

Please note: Your application will require official notification of your SAT or ACT scores. You may provide the results in one of two ways: directly from the testing agency or on your high school transcript. Please request that your SAT and/or ACT examination results be forwarded directly to Congressman Robert Hurt's office. For the SAT, please use code: 5988. For the ACT, please use code: 7728. You may send additional or updated test scores to be included in your file as they become available. All scores must be received by **November 3, 2014**.

VIII. Nomination

Academy/Academies of Interest (Please Rank in order from greatest to least interest) :

- 1) _____ 2) _____
3) _____ 4) _____



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IX. Nomination (Continued)

Please check all additional sources you plan to pursue for nomination:

- | | |
|--|---|
| <input type="checkbox"/> 1. President Barack Obama | <input type="checkbox"/> 2. Vice President Joseph Biden |
| <input type="checkbox"/> 3. Senator Mark Warner | <input type="checkbox"/> 4. Senator Tim Kaine |
| <input type="checkbox"/> 5. JROTC | <input type="checkbox"/> 6. Other _____ |

Have you ever applied for a Congressional Nomination from Congressman Hurt?

☐ No ☐ Yes—Year Applied _____

X. Acknowledgment

I request that Congressman Hurt and the Academy Nomination Board consider my application for a Congressional Nomination to the United States Service Academy or Academies that I have listed. I affirm that I have never been convicted or arrested for violating a state or federal statute. Provisions of the Privacy Act of 1974 are waived to the extent of sharing this information with both the Service Academies and the Fifth District Service Academy Nomination Committee.

XI. Signatures

I certify that I am a legal resident of the Fifth Congressional District of Virginia. I understand that the deadline for application is November 3, 2014. If I have not submitted all of the requested information by the deadline, I understand that my application may not be given full consideration. Furthermore, I authorize the release of my name, school, photograph and Academy information to the media for possible publication.

I, the undersigned, declare that the information I have provided on this application is correct and complete to the best of my knowledge.

Candidate Signature: _____ **Date:** _____

If applicant is under the age of 18, a parental/guardian signature is required. I, the parent or guardian agree to the aforementioned terms and approve the submission of this application.

Parental/Guardian Signature: _____ **Date:** _____



U.S. Service Academy Contact Information:

U.S. Air Force Academy

Office of Admissions
2304 Cadet Drive, Suite 200
USAF Academy, CO 80840-5025
Phone: (800) 443-9266
www.usnaa.edu

U.S. Coast Guard Academy

Congressional nominations are not required for admission. For admission policies, please contact the Academy at:
(860) 444-8500

U.S. Merchant Marine Academy

Office of Admissions
300 Steamboat Road, Wiley Hall
Kings Point, NY 11024-1699
Phone: (866) 546-4778
www.usmma.edu

U.S. Military Academy

Office of Admissions
606 Thayer Road
West Point, NY 10996-1797
Phone: (800) 822-ARMY
www.usma.edu

U.S. Naval Academy

Office of Admissions
117 Decatur Road
Annapolis, MD 21402
Phone: (888) 249-7707
www.usafaa.edu

Please Note:

A Congressional nomination is only part of the process leading to admission to a U.S. Service Academy. It is the responsibility of the student to initiate a pre-candidate file at each Academy to which they are seeking a nomination. We encourage you to apply for all Academies that may be of interest you. If qualified, you may be eligible for a nomination to more than one Academy, if space is available.



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Letter of Recommendation

Print Name

Title or Occupation

Address

City, State, Zip code

Phone

Military Rank, Branch and Years of Service (if applicable)

I am writing at the request of _____ whom I have known personally for _____ year(s). I am not a relative by birth or by marriage, and I believe that he/she is a citizen of good character. My relationship with the applicant is _____, and I am enclosing additional comments below (attach additional pages if needed; however, please use this form as a cover sheet for your statement):

Sincerely,

Signature

Please sign and place in a sealed envelope and give to the applicant to be returned with his or her application



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